



**Manufacturing Plant**  
110 Hopkins Drive  
Randolph, WI 53956-1316  
920 / 326-5141  
920 / 326-5135  
www.hacco.com

**Registration Office**  
110 Hopkins Drive  
Randolph, WI 53956-1316  
920 / 326-5141  
920 / 326-5135  
www.hacco.com

December 12, 2012

FedEx: 8013 4772 7490

Document Processing Desk – 6(a)(2)  
Office of Pesticide Programs  
Document Processing Room S-4900  
One Potomac Yard  
2777 South Crystal Drive  
Arlington, VA 22202

I024782  
-001

**RE: Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident**

Dear Sir/ Madame:

In accordance with FIFRA 6(a)(2) and 40 CFR Part 159.184, we are hereby submitting Voluntary 6(a)(2) Incident Reports for adverse incidents reported to us on December 12, 2012.

Enclosed please find the following item:

1. Voluntary Industry Reporting Form 6(a)(2) Adverse Effects Incident Information  
(Internal ID: 1-32103785)

If you should have any questions regarding this matter, please do not hesitate to contact me at 920-326-2461 or by email at [jklika@neogen.com](mailto:jklika@neogen.com).

Best Regards,  
HACCO, Inc.

Jennifer J. Klika  
Manager, Regulatory Affairs and R&D

Enclosures

JJK/dmg



**\*Personal privacy information\***

**Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information**

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area. Page # 1 of 3

Row 1  Administrative Data	Reporter name:  [REDACTED]	Submission date:	Contact person (if different than reporter)	Internal ID <b>1-32103785</b>
	Address:  <b>Washington</b>	Address:		
	Phone #:  [REDACTED]	Phone #:		
	Incident Status:  <b>New</b>	Location and date of incident <b>Washington Chronic</b>	Date registrant became aware of incident: <b>11/20/2012</b>	Was incident part of larger study?
Row 2  Pesticide(s) Involved	EPA Registration # (Product 1)  <b>61282-46</b>	EPA Registration # (Product 2)	EPA Registration # (Product 3)	
	A.I. (s)  <b>Diphacinone</b>	A.I. (s)	A.I. (s)	
	Product 1 Name  <b>Ramik Green</b>	Product 2 Name	Product 3 Name	
	Exposed to concentrate prior to dilution? <b>NA</b>	Exposed to concentrate prior to dilution?	Exposed to concentrate prior to dilution?	
	Formulation	Formulation	Formulation	
Row 3  Incident Circumstances	Evidence label directions were not followed? <b>No</b> Intentional misuse? <b>No</b>	Incident site: (examples include home, yard, school, industrial, nursery/greenhouse, surface water, commercial turf, building/office, forest/ woods, agricultural (specify crop) right-of-way (rail, utility, highway))  <b>Own Residence</b>		Situation: (act of using product): (examples include mixing/loading, reentry, application, transportation, repair/ maintenance of application equipment, manufacturing/ formulating)  <b>See Description Notes</b>
	Applicator certified PCO? <b>Not applicable</b>			
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff)  <b>See Incident Description</b>			

**11/20/2012 12:04:33 PM Ramik Green**  
**EPA Reg: 61282-46**

***Caller states her husband put some of the product under the house (1 week ago) and ever since then there has been an odor (rotten egg with maggots smell) like the product is outgassing. She and her husband are getting HAs and feel lethargic.***

***Caller then placed me on hold to get another call from Hacco CS. When caller comes back on the line, she indicates that CS never heard of the product outgassing and would suspect any odor from the product should dissipate in 10 days.***

***Caller states at 1st she thought it was her propane tank, but the company came to look at it and it was more than 1/2 full. They did top it off and she is scheduled for a leak test on 12/5/12. She is ventilating the home as much as possible in the mean time.***

***A: The product's main route of harm would be ingestion***

- Product is an LAAC and acts to prevent blood from clotting***
- Product would not be expected to have an odor or cause an inhalation exposure***
- Something else is going on - r/o propane tank, furnace problem, etc.***



Provide all known, required information. If required data field information is unknown, designate as such in appropriate area. Page # 3 of 3

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area. Page # 3 of 3

This box can be used to provide any explanatory or qualifying information surrounding the incident. (add additional pages if necessary)

**1-32103785**